## FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**GEO** Wall Propounting Section

MAY = 7 2008

Name of Offering Will incheck if this is an amendment and name has changed, and indicate change.)

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

**SECTION 4(6), AND/OR** 

UNIFORM LIMITED OFFERING EXEMPTION

Expires: May 31, 2008 Estimated average burden 16.00 hours per response

SEC US	E ONLY
Prefix	Serial
1 _	1
DATE R	ECEIVED
1	

	ommön/Stock a					-Figoration
•	k box(es) that apply):	☐ Rule 504	☐ Rule 505	☑ Rule 506	Section 4(6)	PROCESSED
Type of Filing	☐ New Filing	✓ Amendment				MAY 1 5 2008
			A. BASIC IDENT	IFICATION DATA	/	
1. Enter the info	rmation requested abou		. <u></u>			THOMSON REUTERS
Name of Issuer	•—	n amendment and nar	ne has changed, an	d indicate change.)		
	ment Solutions,	Inc.				N 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Address of Executiv	ve Offices		•	eet, City, State, Zip Code)	1	Number (Including Area Code)
	oe Street, Tower	One Suit		er, CO 80202	(303) 390-5	
Address of Principa (if different from Ex	l Business Operations secutive Offices)		(Number and Stre	eet, City, State, Zip Code)	Telephone	Number (Including Area Code)
(same as abov	/e)				<u> </u>	3 7 2 0 111 0 0 10 1 10 111 0 0 111 0 121 10 111 0 12 12 0 0 111 0 0 11 12 1
Brief Description of	f Business					
Holding comp	oany with subsid	liaries providin	ig risk manag	gement services		E IODINI BENJANJANI BERN ANDIA BENJARAH BINA BENJANJAN
Type of Business O	rganization					08049450
☑ corp		limited partners	• •	i othe	r (please specify):	CEO
D busir	ness trust	limited partners	hip, to be formed			โมเลา คลอยสลาย
	Date of Incorporation	on: (Enter two-letter	Month 0 2 U.S. Postal Service N for other foreign	Year  0 7  abbreviation for State: jurisdiction)	Actual Estir	/M1 / / 2000
	TIONS	·				<u> </u>
GENERAL INSTR	RUCTIONS					/ ଓଡ଼ିଆ
77d(6).						, 17 CFR 230.501 et seq. or 15 U.S.C.
<b>Exchange Commiss</b>	notice must be filed no tion (SEC) on the earlie was mailed by United St	er of the date it is rece	eived by the SEC a	at the address given below	ng. A notice is dee w or, if received at t	med filed with the U.S. Securities and hat address after the date on which it is
Where to File: U.S.	. Securities and Exchan	ge Commission, 450	Fifth Street, N.W.,	Washington, D.C. 20549	).	
Copies Required: photocopies of the r	Five (5) copies of this nanually signed copy o	notice must be filed r bear typed or printed	d with the SEC, of signatures.	one of which must be ma	anually signed. An	y copies not manually signed must be
Information Require the information require with the SEC.	ed: A new filing must uested in Part C, and a	contain all information on material changes f	on requested. Am from the information	endments need only repo on previously supplied in	rt the name of the is Parts A and B. Par	ssuer and offering, any changes thereto, it E and the Appendix need not be filed
Filing Fee: There is	s no federal filing fee.					
adopted ULOE ar where sales are to amount shall acco	nd that have adopted he, or have been ma	this form. Issuers ide. If a state requi This notice shall be	relying on ULO res the payment e filed in the ap	E must file a separate of a fee as a precondit	notice with the Se ion to the claim fo	securities in those states that have ccurities Administrator in each state or the exemption, a fee in the proper te law. The Appendix in the notice
Failure to file appropriate fe filing of a fede	deral notice will n	ropriate states w ot result in a los	ill not result in	a loss of the fede	ral exemption. unless such ex	Conversely, failure to file the cemption is predicated on the

		A. BASIC IDEN	NTIFICATION DATA		
Enter the information request	ed for the following:			·	
Each promoter of the is:	suer, if the issuer has	been organized within th	e past five years;		
<ul> <li>Each executive officer a</li> </ul>	ınd director of corpor	ate issuers and of corpora	ate general and managing par	tners of partnersh	ip issuers; and
A. BASIC IDENTIFICATION DATA  2. Enter the information requested for the following:  • Each beneficial owner having the power to vote or disposit, or disposition of, 10% or more of a class of equity securities of the issuer.  • Each beneficial owner having the power to vote or disposes, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.  • Each beneficial owner having the power to vote or disposes, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.  • Each peneral and director of corporate issuers and of corporate general and managing partners of partnership issuers; and  • Each general and managing partner of partnership issuers.  Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Image: Odd Partner   Image: Odd Partner					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	
Full Name (Last name first, if indiv	/idual)				
		<u></u>			
		•	•		
c/o 1515 Arapahoe Stre	et, Tower One	e, Suite 1500, D	enver, Colorado 80		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	<b>—</b>
Full Name (Last name first, if indiv	ridual)	-			
			. <u></u>		
c/o 1515 Arapahoe Stre	et, Tower One	e, Suite 1500, D	enver, Colorado 80	<u> </u>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	<del>_</del>
Full Name (Last name first, if indiv	/idual)				
Coughlon, Timothy J.					
		•			
c/o 1515 Arapahoe Stre	et, Tower One	e, Suite 1500, D	enver, Colorado 80	)202	
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐Executive Officer	☑ Director	<del></del>
Full Name (Last name first, if indiv	idual)		<del></del>		
Tikker, Blair					
		•	•		
c/o 1515 Arapahoe Stre	et, Tower One	e, Suite 1500, D	enver, Colorado 80	)202	<u> </u>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	<del></del>
Full Name (Last name first, if indiv	idual)				
Rogers, Bruce					
Business or Residence Address		(Number and Street, C			
c/o 1515 Arapahoe Stre	et, Tower One	e, Suite 1500, <u>C</u>	enver, Colorado 80	0202	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if indiv	idual)			<del></del>	
KRG Capital Fund III, l	L. <b>P</b> .				
Business or Residence Address		(Number and Street, C			
c/o 1515 Arapahoe Stre	et, Tower One	e, Suite 1500, D	enver, Colorado 80	)202	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Check Box(es) that Apply:	Promoter	Beneficial Owner	□Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				
KRG Capital Fund II	I (PA), L.P.				
Business or Residence Address		(Number and Street, C	City, State, Zip Code)		
c/o 1515 Arapahoe S	treet, Tower C	one, Suite 1500, D	Denver, Colorado 80	)202	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				
McCarthy, Mark					
Business or Residence Address		(Number and Street, 6	City, State, Zip Code)		
c/o 1515 Arapahoe Si	treet, Tower C	one, Suite 1500, D	Denver, Colorado 80	0202	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Elia, Michael					
Business or Residence Address		(Number and Street, (	City, State, Zip Code)		<del></del>
c/o 1515 Arapahoe Si	reet, Tower C	ne, Suite 1500, I	Denver, Colorado 8	0202	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if ir	dividual)				
Business or Residence Address		(Number and Street,	City, State, Zip Code)		

					B. I	NFORMAT	TION ABOU	T OFFERI	NG				
. <u> </u>	Uga sh	iconor cal	d ordoes t	he iccher in	tend to sall	to non-sec	credited inv	estors in th	is offering?			Yes □	No ☑
•	rias uic	issuei son										_	۳
	What is	the minim					, if filing un ny individua					\$	N/A
	wiiai i	s the minn	idili ilivesti	ment that w	m oc accep	ica nom a	.,	***************************************				Yes	No
													Ø
	commis offering with a	ssion or si g. If a pers state or sta	imilar remusion to be list tes, list the	uneration for sted is an as name of the	or solicitat ssociated pe he broker o	ion of pur erson or age or dealer. I	chasers in ent of a bro	connection ker or dealer five (5) p	with sale er registered ersons to b	s or secur d with the e listed are	irectly, any ities in the SEC and/or associated	<del>;</del>	
ıll Na	ame (La	st name fir	st, if indivi	dual)									
/ <u>A</u>			<del></del>		<del>.</del>								
usine	ss or Re	sidence Ac	idress (Nur	nber and St	reet, City,	State, Zip C	Code)						
0000	of Acces	sisted Drob	er or Deale	•r						<del></del> .			
ame (	OI ASSOC	Jaica Brok	ici oi Dealt	,ı									
tates i	in Whic	h Person L	isted Has S	olicited or	Intends to S	Solicit Purc	hasers						
										*************************	□ A	Il States	
ſ	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
L	ΙL	IN	ĪA	KS	KY	Ī.Ā	ME	MD	MA	MI	MN	MS	MO
1	MT	NE	NV	NH	ИЛ	MM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
`			st, if indivi	dual)	<u> </u>	<del>_</del>						<del></del>	
				· 									
usine	ss or Re	sidence Ac	ldress (Nur	nber and St	reet, City,	State, Zip (	Code)						
ame o	of Assoc	iated Brok	er or Deale	er						<del> </del>			
ntec i	in Which	n Person I	isted Has S	olicited or	Intends to S	Solicit Purc	hasers	<del></del>	<u></u>	<u> </u>	•		
				dividual St								Il States	
(C	neck "A		OF CHECK III									iii ouitos	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
								DE MD	DC MA	FL			МО
	AL	AK	AZ	AR	CA	CO	CT	=	=	=	GA	HI	МО
	AL	AK IN	AZ IA	AR KS	CA KY	CO	CT ME	MD	MA	MI	GA MN	HI MS	
[] [] []	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ	CO LA NM	CT ME NY	MD	MA	MI	GA MN OK	MS OR	МО
[] [] []	AL IL MT RI	AK IN NE SC	AZ IA NV	AR KS NH TN	CA KY NJ	CO LA NM	CT ME NY	MD	MA	MI	GA MN OK	MS OR	МО
[] [] [] III Na	AL IL MT RI ame (Las	IN NE SC st name firs	AZ IA NV SD st, if individ	AR KS NH TN	CA KY NJ TX	EA NM UT	ME NY VT	MD	MA	MI	GA MN OK	MS OR	МО
II Na	AL IL MT RI ame (Las	IN NE SC st name first sidence Ad	AZ IA NV SD st, if individ	AR KS NH TN dual)	CA KY NJ TX	EA NM UT	ME NY VT	MD	MA	MI	GA MN OK	MS OR	МО
Ill Na	AL IL MT RI RI sss or Record	AK IN NE SC st name first	AZ  IA  NV  SD  st, if individences (Number or Deale	AR KS NH TN dual)	CA KY NJ TX reet, City, S	LA NM UT State, Zip (	ME NY VT	MD	MA	MI	GA MN OK	MS OR	МО
In It I National I was income of the states in a state of the states in	IL MT RI Same (Lass or Resonance of Association Which is not associated by the same of Associate	IN NE SC st name first name first name first name first name Person Line Newson Line Newso	AZ NV SD st, if individed ress (Number or Dealed sted Has S	AR KS NH TN dual) hber and St	KY NJ TX reet, City, S	LA NM UT  State, Zip (	ME NY VT	MD NC VA	MA ND WA	MI OH WV	GA MN OK WI	MSI OR WY	МО
[] [] [] [] [] [] [] [] [] [] [] [] [] [	AL IL MT RI ame (Lassor Resor Res	IN NE SC st name first	AZ  IA  NV  SD  st, if individence or Deale sted Has So or check income.	AR KS NH TN dual)  The and St  olicited or dividual Sta	TX  TX  Intends to States)	LA NM UT  State, Zip (	ME NY VT	MD NC VA	MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
usines ame o	AL IL MT RI RI of Associan Which Check "A AL	IN NE SC st name first sidence Ad iated Brok Person Li Il States" of	IA NV SD st, if individual indivi	AR KS NH TN dual)  The and St of dividual Sta AR	TX  reet, City, S  Intends to S  ates)	LA NM UT  State, Zip C	ME NY VT  Code)	MD NC VA	MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
ull Natusines	AL IL MT RI ame (Lassor Resor Res	IN NE SC st name first	AZ  IA  NV  SD  st, if individence or Deale sted Has So or check income.	AR KS NH TN dual)  The and St  olicited or dividual Sta	TX  TX  Intends to States)	LA NM UT  State, Zip (	ME NY VT	MD NC VA	MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	F P	ROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, chec this box \( \sqrt{\sqrt{\text{and}}} \) and indicate in the columns below the amounts of the securities offered for exchange an already exchanged,	k			
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0.00		0.00
	Equity		5.000.016.50 (1)	<b>s</b>	5,000,016.50 (1)
	☑ Common ☑ Preferred			_	
	Convertible Securities (including warrants)	\$_	0.00	_	0.00
	Partnership Interests	\$_	0.00	\$_	0.00
	Other (Specify)			\$	0.00
	Total			<b>s</b>	5,000,016.50
	Answer also in Appendix, Column 3, if filing under ULOE.	_	, , <u> </u>		
	(1) This amendment on Form D is being filed to reflect the fact that, following the issuance of common and preferred stock in exchange for \$5,000,016.50 in March 2008, certain stockholders of the issuer exercised preemptive rights to participate in such issuance. As a result, the original investors in the March 2008 issuance sold back a certain amount of common and preferred stock in exchange for \$143,197.90, and such shares of common and preferred stock were then, in turn, sold to the stockholders exercising their preemptive rights for \$143,197.90.			-	
2.	Enter the amount of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	te	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors.		8	\$	5,000,016.50
	Non-accredited Investors.	_	0	_ s	0
	Total (for filings under Rule 504 only)	_		s	
	Answer also in Appendix, Column 4, if filing under ULOE.			_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	es ie	Type of		Dollar Amount
	Type of offering		Security		Sold
	Rule 505	_		<b>S</b> _	·
	Regulation A	_		<b>s</b> _	
	Rule 504			\$_	
	Total			\$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issue. The information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	r.			
	Transfer Agent's Fees			\$_	
	Printing and Engraving Costs			<b>\$</b> _	
	Legal Fees		<b></b>	\$_	22,000
	Accounting Fees			<b>S</b> _	<u>.                                    </u>
	Engineering Fees			\$_	·

Sales Commissions (specify finders' fees separately)				\$	
Other Expenses (identify) Miscellaneous				\$	
Total			◩	<u>\$</u>	22,000
C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OI	FPROCEEDS			
b Enter the difference between the aggregate offering price given in response to Pa Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference "adjusted gross proceeds to the issuer."	e is the			\$_	4,978,016.50
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to the for each of the purposes shown. If the amount for any purpose is not known, furnish an exand check the box to the left of the estimate. The total of the payments listed must equality adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.	stimate	Payments to			
		Officers, Directors, & Affiliates			Payments to Others
Salaries and fees	□ \$_		_ 🗆	\$_	
Purchase of real estate	<b>S</b> _		_ 🗆	\$_	
Purchase, rental or leasing and installation of machinery and equipment	□ <b>s</b> _		_ 🗆	<b>s</b> _	
Construction or leasing of plant buildings and facilities	□ \$_		_ 🗆	\$_	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$_		_ 🗆	\$_	
Repayment of Indebtedness	□ \$_		_ 🗵		4,978,016.50
Working capital				\$_	
Other (specify):	□ <b>s</b> _		_ 🗆	\$_	
	□ <b>\$</b> _			<b>S</b> _	
Column Totals	□ \$_	<u></u> -	_ <b>\</b>	\$_	4,978,016.50
Total Payments Listed (column totals added)		$\square$	4.978	3.016	.50

n	CCD	CDA	LEICN	ATURE
17.	rcv	r.KA	LOSIGN	ALUKE.

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Risk Management Solutions, Inc.	Man selyan	May, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Mark McCarthy	Secretary	

-ATTENTION-

		E. STATE SIGNATURE	
1.	Is any party described in 17 CFR 230.262 presprovisions of such rule?		Yes No □ ☑
	•	See Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required by	furnish to any state administrator of any state in whi	ich this notice if filed a notice on Form D
3.	The undersigned issuer hereby undertakes to offerees.	furnish to the state administrators, upon written requ	est, information furnished by the issuer to
4.	The undersigned issuer represents that the is Offering Exemption (ULOE) of the state in w has the burden of establishing that these condi	suer is familiar with the conditions that must be satisfich this notice is filed and understands that the issuer tions have been satisfied.	sfied to be entitled to the Uniform limited claiming the availability of this exemption
	e issuer has read this notification and knows the y authorized person.	contents to be true and has duly caused this notice to be	e signed on its behalf by the undersigned
Íssu	er (Print or Type)	Signature	Date
Ri	sk Management Solutions, Inc.	Mand Milan	May ≤, 2008
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)	
M	ark McCarthy	Secretary	

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX 5 1 2 3 4 Disqualification under State ULOE (if yes, Type of security attach Intend to sell and aggregate offering price Type of investor and amount purchased in State explanation of to non-accredited waiver granted) offered in state investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Non-Number of Accredited Accredited Yes No **Investors** State Yes No **Investors Amount** Amount ΑL ΑK ΑZ AR $\mathsf{C}\mathsf{A}$ \$0.00 Common Stock and \$4,856,818.60 0 4 CO Preferred Stock; Total: \$4,856,818.60 CT DE DC

FL

GA

HI

ID

IL

IN

ΙA

KS

KY

LA

ME MD

MA

A	PP	EN	DIX	
---	----	----	-----	--

1		2	3			4			5
1	to non invest	nd to sell -accredited ors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				lification r State (if yes, each ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount <sub>.</sub>	Yes	No
MI	·-								
MN									
MS									
МО									
MT									
NE									
NV									
NH							-		
NJ		i							
NM									
NY									
NC									
ND									
ОН									
ок									
OR									
PA		✓	Common Stock and Preferred Stock; Total: \$95,160.90	l	<b>\$</b> 95,160.90	0	0.00		<b>*</b>
RI									
SC									
SD									
TN		✓	Common Stock and Preferred Stock; Total: \$5,240.40	1	\$5,240.40	0	0.00		<b>✓</b>
TX	_	✓	Common Stock and Preferred Stock; Total: \$42,796.60	2	\$42,796.60	0	0.00		<b>*</b>
UT									ļ
VT									

	<u>-</u>			APPE	NDIX				
1	Intend to sell to non-accredited investors in State		3 4				5		
			Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
VA	-								
WA									
wv									
WI									
WY									
PR									

